



Active Employee

Health Benefit Brochure

Supplement to 2005 Reference Guide
for Active Employees

*Hawaii Employer-Union
Health Benefits Trust Fund*

Effective July 1, 2006

INTRODUCTION

This benefits brochure supplements the 2005 Reference Guide for Active employees. The brochure only includes changes, additions and deletions to current health benefit plans. In addition, it provides an update of the changes to procedures or re-emphasizes key instructions to which each employee must comply. This brochure will also be available at the EUTF's website, www.eutf.hawaii.gov, where you can easily access it when you have questions about your benefits or want another copy of the 2005 reference guide. For a more detailed explanation of your benefits, please contact the appropriate insurance carrier.

2006 OPEN ENROLLMENT

The open enrollment period is April 17 through May 19, 2006. Each active employee is receiving this brochure along with a pre-completed Open Enrollment Form for Active Employees (OE-1) that contains the information that EUTF had available as of March 1, 2006. If you have made or submitted any changes since February 1, 2006, your changes may not be reflected on the OE-1 enrollment form. You may contact the EUTF to verify any changes submitted after that date. Each employee is asked to review the information for accuracy of information and make any changes that are needed. You may cross out any information that should be deleted and legibly print any new information.

If you have no changes, you are done with open enrollment. You will be re-enrolled in the same plans and coverage that you currently have. If you have changes, additions or deletions, please submit your changes to your employer by May 19, 2006. Please ensure that you sign the OE-1 form.

OPEN ENROLLMENT ASSISTANCE

An Open Enrollment informational session schedule is included in this brochure. Any changes will be posted on our website, www.eutf.hawaii.gov. Please check the website for the most current schedule.

These meetings are offered so that you can meet with your insurance carriers to learn more about your EUTF benefit plans. The meetings will begin with a half-hour overview of the benefits. The remaining hour and a half is for you to meet with the insurance carriers and the EUTF staff. If you have questions regarding your pre-completed open enrollment form, please bring it with you to the open enrollment sessions listed below.

Special Announcement

IF YOU ARE A MEMBER OF BARGAINING UNIT 05, YOU NEED TO CONTACT YOUR UNION TO ENSURE THAT YOU ARE CORRECTLY ENROLLED IN BU05. Act 245, SLH 2005 allowed each employee organization to establish its own VEBA trust fund to handle its members. The only reason for you to receive an OE-1 and this brochure is because our records show and DOE confirmed that you are not a BU05 member. Effective March 1, 2006, all members of Bargaining Unit 05 and 45 are required to be administered by HSTA MBC for health benefits. If you retire on or after March 1, 2006, you will also be enrolled with HSTA MBC, not with the EUTF retiree plan. For more information contact: HSTA-Member Benefits Corporation, 1350 S. King St., Suite 230, Honolulu, HI 96814, Phone 808-591-2823, Fax 808-591-2652.

What do I have to do to ensure that my health benefits continue?

1. You should have received a pre-completed enrollment form (OE-2) that indicates the plans in which you are currently enrolled. Review this form to ensure that the plans noted are the plans you want. If the plan is incorrect or you want to change your plan or coverage, make the changes on the form. Please ensure that any changes you make are legible. Sign the form and return it to the EUTF no later than May 19, 2006.
2. If you have no changes, you are done with open enrollment. You will be reenrolled in the same plans and coverage that you currently have.
3. **IF YOU HAVE ANY CHANGES, IT IS ABSOLUTELY CRITICAL THAT YOU SUBMIT YOUR CHANGES TO YOUR PERSONNEL OFFICE NO LATER THAN MAY 19, 2006.**
4. When changes are made, the EUTF will send a confirmation notice to you. The confirmation notice allows you to ensure that the changes you submitted are correct.

Plan Benefit Changes and Clarifications

The health benefit plans for the period July 1, 2006 – June 30, 2007 will not change from the current plan year with the exception of Kaiser Permanente medical plan and the Aetna life insurance. A summary of the Kaiser Permanent medical plan changes and a revised life insurance amounts are shown below. Please refer to the 2005 Reference Guide for Active Employees or contact your insurance carrier to obtain an updated benefit brochure.

Long Term Care Insurance. The Long-Term Care plan, previously offered by Hartford Life Insurance, is no longer offered by the EUTF. However, those individuals that are currently covered under the plan will continue to be covered and will continue to be billed for the premium. Your coverage has not been cancelled. You coverage will continue for as long as you pay your premiums. Be advised that the insurance company has the right to increase your premiums after January 1, 2006. However, your premiums will be increased only if they are increased for all people covered by the plan.

MEDICAL AND PRESCRIPTION DRUGS PLAN

HMSA Medical and Prescription Drugs plan

Health benefits for all active employees remain the same. HMSA periodically reviews your health plans to ensure that these health plans provide you with quality health plan benefits in compliance with state and federal laws and are structured to best manage health care costs.

This document is for general information use only and is not for use as the certificate for the plan. The *Guide to Benefits* will contain complete information on these changes as well as, other benefits and applicable exclusions and limitations of your plan. In the case of a discrepancy between this summary and the language contained in the *Guide to Benefits* or plan certificate, the *Guide to Benefits* or plan certificate take precedence. You can find this Guide to Benefits at the HMSA website for EUTF at www.hmsa.com/portal/ and or you may access this website through the EUTF website, www.eutf.hawaii.gov by clicking on the “Links to Carrier” line. HMSA has created a special site for EUTF members.

The changes made were either administrative or language clarifications in nature and applies to the HMSA PPO, HMSA Dual and the HMSA Prescription Drugs plans, as appropriate. The most significant administrative changes dealt with precertification requirements for some services to reflect the current policies. For a complete listing of these changes, please contact your local HMSA officer or visit the HMSA website noted above.

KAISER PERMANENTE Medical Plan

This is only a summary of the Kaiser Permanente plan changes which are effective July 1, 2006. It does not fully describe your benefit coverage. Details on the exact terms of your benefit coverage, exclusions, and plan terms are in a Service Agreement between the EUTF and Kaiser Permanente. The Service Agreement is the binding contractual document between Kaiser, the EUTF, and EUTF Kaiser members. For details of your benefit coverage, exclusions, and plan terms or to obtain a packet of benefit information, please contact the Kaiser Customer Service Center at (808) 432-5955 (Oahu) or toll-free, 1-800-966-5955 (Neighbor Islands) or log on to my.kaiserpermanente.org/hi/eutf.

Summary of 2006 Important Changes

Benefit and contract changes:
1. Office visit copayment. Increase from \$12 to \$14 per visit.
2. Inpatient/Outpatient lab, imaging, and testing. Currently no charge, changed to a 10% copay for these services.
3. Preventive screening services. Certain preventive screening services will not be subject to the 10% copay and instead be covered at no charge. Office visit copay will be charged if applicable. The list of services that fall under the preventive screening benefit is in the Service Agreement.

<p>4. Physical, occupational, and speech therapy. There will no longer be a 2 month limit on these therapies. However, keep in mind that only short term therapy is covered. As determined by a Kaiser Permanente physician, the therapy must be necessary to sufficiently restore neurological and/or musculoskeletal function that was lost or impaired due to an illness or injury.</p>
<p>5. Serious mental illness parity. The serious mental illness (parity) benefit has been expanded to include obsessive compulsive disorder, dissociative disorder, delusional disorder, and major depression.</p>
<p>6. Live or work. Subscribers must live or work in the Hawaii service area to be enrolled in a Kaiser Permanente plan. Family dependents must live in the Hawaii service area to enroll (or continue to be enrolled) in a Kaiser Permanente plan.</p>
<p>Benefit and contract clarifications:</p>
<p>1. Office visits. An office visit is defined as evaluation and management services, which may include some or all of the following: examination, history, and/or medical decision making. Office visits do not include, for example, outpatient procedures. Outpatient procedures would be covered per the member's outpatient procedures benefit.</p>
<p>2. Physical, occupational, and speech therapy. Physical, occupational, and speech therapy deficits due to developmental delay are not covered.</p>
<p>3. Family dependent child. The definition of "child" for purposes of enrolling as a family dependent is defined in the EUTF Administrative Rules.</p>

For exact details on your benefit coverage, exclusions, and plan terms, please refer to EUTF's Service Agreement that includes applicable Face Sheet, Group Medical and Hospital Service Agreement, Benefit Schedule, and Riders. This Service Agreement is the legal binding document between Health Plan and its members. Except for certain situations outlined in the Service Agreement, all claims, disputes, or causes of action arising out of or related to the Service Agreement, its performance or alleged breach, or the relationship or conduct of the parties, must be resolved by binding arbitration. For claims, disputes, or causes of action subject to binding arbitration, all parties give up the right to jury or court trial. For a complete description of arbitration information, please see the Service Agreement.

<p>NOTE: General reminder for all members:</p>
<p>Unless explicitly described in a particular benefit section, each medical service or item is covered according to its relevant benefit section. For example, labs or blood related to a hospital stay are not covered under the hospital benefit. Labs related to a hospital stay are covered under the lab benefit. Blood received during a hospital stay is covered under the blood benefit.</p>
<p>Kaiser Permanente's web services now allow you to make appointments, order prescription refills, and more. For more information log on to my.kaiserpermanente.org/hi/eutf or contact the Customer Service Center at (808) 432-5955 (Oahu) or 1-800-966-5955 (Neighbor Islands).</p>

Royal State Dual Medical Plan – no benefit changes

CHIROPRACTIC

ChiroPlan Hawaii by MBAH – no benefit changes

DENTAL

HDS Regular and HDS Dual plans

Your HDS benefits remain the same. The EUTF Reference Guide for Active Employees published in 2005 did not indicate the coverage for implants. Implants are covered at 60%, limited to the plan maximum (as an alternate benefit), when one tooth is missing between two natural teeth.

HDS recently launched a phone service, as another resource, called HDS DenTel. You may call HDS DenTel to find out when you are eligible for your next dental visit, obtain claims information, or even have a summary of your plan benefits faxed or mailed to you, simply by following the prompts on the phone. The number is (808) 529-9333 or toll free from the Neighbor Islands or the Continental USA at 1-800-232-2533, ext. 333.

The HDS Customer Service Department is also available at (808) 529-9248 or toll-free from the neighbor islands and continental U.S. at 1-800-232-2533 extension 248.

For a full description of your dental benefits and how to access them, refer to the EUTF website, www.eutf.hawaii.gov. You may also obtain information from the HDS website, www.deltadentalhi.org. Certain limitations, restrictions and exclusions may apply to the plan. In the case of a discrepancy the HDS Schedule of Benefits will govern.

VISION

VSP Regular and VSP Dual plans

Your vision benefits for both plans remain the same.

AETNA Life Insurance

Life insurance benefits, underwritten by Aetna Life Insurance Company, were increased by approximately 20% over the previous year's ceilings at no additional cost to the employer or the employee. For complete information and provisions, contact Aetna Customer Service at 1-866-227-9954 or visit their website, www.aetna.com.

Submit claims to: Aetna Inc. Life Service Center
151 Farmington Avenue – RE52
Hartford, CT 06156-3007
Fax Number for Claim Submission: 1-800-238-6239

In the event of your death, the life insurance company will pay your beneficiary the applicable amount of life insurance benefits as shown below:

Classification	Benefit Amount
Under age 65	\$31,217
Age 65 through 69	\$20,291
Age 70 through 74	\$14,048
Age 75 through 79	\$9,365
Age 80 and over	\$6,243

Open Enrollment Informational Sessions Schedule

The EUTF has scheduled several Open Enrollment Informational sessions for your convenience. These sessions will be your opportunity to obtain more information regarding your health benefits. The health plans will have representatives to field any of your questions or concerns.

<u>Date</u>	<u>Time</u>	<u>Location</u>
04/20/06	9:00 a.m.	Leeward Community College, GT105
04/20/06	11:00 a.m.	Leeward Community College, GT105
04/20/06	2:00 p.m.	Leeward Community College, GT105
04/21/06	1:00 p.m.	Kona Armory
05/01/06	11:00 a.m.	Waikapu Comm. Center
05/01/06	2:00 p.m.	Waikapu Comm. Center
05/03/06	9:00 a.m.	Kuykendall Auditorium
05/03/06	2:00 p.m.	Kuykendall Auditorium
05/04/06	9:00 a.m.	Windward Comm. College
05/04/06	11:00 a.m.	Windward Comm. College
05/04/06	2:00 p.m.	Windward Comm. College
05/08/06	11:00 a.m.	Kauai War Memorial Convention Center
05/08/06	2:00 p.m.	Kauai War Memorial Convention Center
05/09/06	9:00 a.m.	Capitol Auditorium
05/09/06	11:00 a.m.	Capitol Auditorium
05/09/06	2:00 p.m.	Capitol Auditorium
05/11/06	9:00 a.m.	Aunt Sally Kaleohano's Luau Hale
05/11/06	1:00 p.m.	Aunt Sally Kaleohano's Luau Hale
05/16/06	9:00 a.m.	Kahala Community & Recreation Center
05/16/06	1:00 p.m.	Kahala Community & Recreation Center
05/17/06	9:00 a.m.	Kapolei Hale, Conference Room A
05/17/06	11:00 a.m.	Kapolei Hale, Conference Room A
05/17/06	2:00 p.m.	Kapolei Hale, Conference Room A
05/18/06	9:00 a.m.	City Hall Annex, Mission Memorial Aud.
05/18/06	11:00 a.m.	City Hall Annex, Mission Memorial Aud
05/18/06	2:00 p.m.	City Hall Annex, Mission Memorial Aud

Open Enrollment Locations

OAHU

Leeward Community College
96-045 Ala Ike
Pearl City, HI 96782

Kapolei Hale Conference Room A/B
1000 Uluohia Street
Kapolei, HI 96707

Kahala Community & Recreation Center
4495 Pahoa Avenue
Honolulu, HI 96822

U.H. Kuykendall Auditorium
1733 Donagho Road
Honolulu, HI 96822

State Capitol Auditorium
415 South Beretania Street
Honolulu, HI 96813

Windward Community College, Akoakoa Room
45-720 Keaahala Road
Kaneohe, HI 96744

City Hall Annex, Mission Memorial Auditorium
S Beretania St
Honolulu, HI 96813

HAWAII

Kona Armory
81-1032 Nani Kupuna Rd.
Kealahakua, HI 96740

Aunt Sally Kaleohano's Luau Hale
799 Piilani Street
Hilo, HI 96720

MAUI

Waikapu Community Center
22 E. Waiko Rd.
Wailuku, HI 96793

KAUAI

Kauai War Memorial Convention Center
4191 Hardy Street
Lihue, HI 96766

Premium Rates for Plans Effective July 1, 2006

Carrier	Type of Plan	Coverage	Employer Contribution	Employee Contribution	Total Premiums
HMSA	PPO Medical, Drugs, Chiropractic	Single	\$155.42	\$102.48	\$257.90
		Family	\$467.84	\$308.54	\$776.38
Kaiser	HMO Medical, Drugs, Chiropractic	Single	\$155.42	\$112.70	\$268.12
		Family	\$467.84	\$335.30	\$803.14
HMSA	Dual Medical, Drugs, Chiropractic	Single	\$87.28	\$57.06	\$144.34
		Family	\$265.46	\$173.60	\$439.06
Royal State	Dual Medical, Drugs, Chiropractic	Single	\$26.50	\$16.54	\$43.04
		Family	\$81.74	\$51.12	\$132.86
HMSA	Prescription Drugs Only	Single	\$29.88	\$19.62	\$49.50
		Family	\$91.92	\$60.38	\$152.30
HDS	Dental	Single	\$17.38	\$11.48	\$28.86
		Family	\$59.50	\$22.94	\$82.44
HDS	Dual Dental	Single	\$10.30	\$6.76	\$17.06
		Family	\$29.76	\$19.52	\$49.28
VSP	Vision	Single	\$3.44	\$2.28	\$5.72
		Family	\$7.40	\$4.88	\$12.28
VSP	Dual Vision	Single	\$1.54	\$1.02	\$2.56
		Family	\$3.36	\$2.18	\$5.54
AETNA	Life Insurance	Employee	\$4.16	None	\$4.16

To Contact the EUTF:

Mailing Address: P.O. Box 2121, Honolulu HI 96805

Location Address: 201 Merchant Street, Suite 1520, City Financial Tower, Honolulu, Hawaii

Telephone Numbers

Local number: 808-586-7390

Toll-Free number: 800-295-0089

Fax number: 808-586-2161

Email address: eutf@hawaii.gov

Website address: www.eutf.hawaii.gov